

April 22, 2014  
**FOR IMMEDIATE RELEASE**

## Summary of April 17-18, 2014, Board Meeting

The following is a summary of April 17-18, 2014, meeting of the Iowa Board of Medicine.

**Cases Reviewed:** The Board reviewed 100 cases.

**New Investigative Cases:** The Board reviewed 37 new investigative cases.

**Statement of Charges:** Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board may file a Statement of Charges which contains the allegations of the Board.

The Board approved 1 Statements of Charges.

An Iowa-licensed physician who formerly practiced psychiatry in Springfield, Missouri, had formal disciplinary charges filed against him by the Iowa Board on April 17, 2014. The physician's Iowa medical license has been inactive due to nonrenewal since August 1, 2000. On April 20, 2000, the physician was disciplined by the Missouri State Board of Registration for the Healing Arts (Missouri Board) for substance abuse. The Missouri Board placed the physician on probation for a period of seven (7) years. On June 28, 2001, the Iowa Board disciplined the physician based on the Missouri disciplinary action. The Iowa Board placed the physician on probation for a period of time concurrent with the probation in Missouri. On February 14, 2012, the physician was disciplined by the Missouri Board for inappropriately prescribing controlled substances to patients and/or failing to prevent diversion of controlled substances, and failing to provide appropriate psychiatric care to multiple patients. The Missouri Board placed the physician on probation for a period of ten (10) years. The Iowa Board charged the physician with being disciplined by the Missouri Board. A hearing is scheduled on August 7, 2014.

**Combined Statement of Charges and Settlement Agreements:** Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board and the licensee may enter into a combined Statement of Charges and Settlement Agreement to resolve the matter. A combined Statement of Charges and Settlement Agreement contains the allegations and the sanctions.

The Board approved 2 Combined Statement of Charges and Settlement Agreements.

1. An Iowa-licensed physician who formerly practiced ophthalmology in Fayetteville, North Carolina, entered into a combined Statement of Charges and Settlement Agreement on April 17, 2014. The physician's Iowa medical license went inactive due to nonrenewal on April 1, 2000. On October 28, 2013, the North Carolina Medical Board charged the physician with prescribing controlled substances to multiple patients in Fayetteville, North Carolina, without establishing a documented physician-patient relationship, without performing histories and physical examinations and without maintaining medical records. On May 24, 2013, the physician voluntarily surrendered his North Carolina medical license. The physician completed residential treatment for an alcohol disorder and is currently a participant in the North Carolina Physicians Health Program. Under the terms of the April 17, 2014, combined Statement of Charges and Settlement Agreement, the physician voluntarily surrendered his Iowa medical license.
2. An Iowa-licensed physician who formerly practiced medicine in Ft. Collins, Colorado, entered into a combined Statement of Charges and Settlement Agreement on April 17, 2014. The physician's Iowa medical license went inactive due to nonrenewal on December 1, 1987. In August 2012, the Colorado Medical Board received a complaint that the physician was using alcohol and drugs in a manner which impaired his ability to safely practice medicine. The Colorado Board ordered the physician to undergo an evaluation by the Colorado Physician Health Program. In March 2013, the Colorado Board received a complaint from an inmate at the Colorado Department of Corrections alleging that the physician failed to treat his fractured hand in a timely manner. On July 11, 2013, the physician entered into a Stipulation and Final Agency Order with the Colorado Board. The Colorado Board charged the physician with unprofessional conduct and he agreed to place his Colorado medical license on inactive status and not apply for reactivation of the license in the future. Under the terms of the April 17, 2014, combined Statement of Charges and Settlement Agreement, the physician voluntarily surrendered his Iowa medical license.

**Settlement Agreements:** After the Board has determined that probable cause exists to take formal disciplinary action and formal disciplinary charges have been filed, the Board and the licensee may enter into a Settlement Agreement to resolve the pending disciplinary charges rather than hold a formal disciplinary hearing.

The Board approved 1 Settlement Agreement.

An Iowa-licensed physician who formerly practiced cardiothoracic surgery in Iowa City, Iowa, and currently practices in Indianapolis, Indiana, entered into a Settlement Agreement with the Board on April 17, 2014. On March 8, 2013, the Board charged the physician with engaging in unprofessional conduct. In 2003, the physician was placed on probation during his residency training following allegations of intermittent unprofessional behavior in his interactions with a member of the healthcare team. In 2007, the physician was placed on administrative leave for two weeks during his fellowship training pending investigation of an allegation that he engaged in unprofessional conduct in his interactions with another healthcare provider. On November 8, 2010, the physician was placed on administrative leave in Iowa City, Iowa, pending investigation of an allegation that he shoved another physician in the chest during a cardiac crisis in the operating room. the physician completed a Board-approved comprehensive professional assessment in December 2010 and he voluntarily participated in individual counseling. Under the terms of the April 17, 2014, Settlement Agreement, the Board issued the physician a Citation and Warning and ordered him to pay a \$5,000 civil penalty.

**Reinstatement Orders:** After the Board has revoked or suspended a physician's Iowa medical license, the Board may reinstate the license subject to certain terms and conditions upon a showing by the physician that the basis for suspension no longer exists and that it is in the public interest for the license to be reinstated.

The Board approved 1 Reinstatement Order.

An Iowa-licensed physician who formerly practiced psychiatry in a residency training program in Sioux Falls, South Dakota, had his Iowa medical license reinstated on April 17, 2014. On May 12, 2011, the South Dakota Board of Medical and Osteopathic Examiners revoked the physician's South Dakota resident training permit after finding that he engaged in a sexual relationship with a female mental health patient he was treating. On June 3, 2011, the Iowa Board charged the physician with engaging in a sexual relationship with a female mental health patient and being disciplined by the South Dakota Board. On July 28, 2011, the physician entered into a Settlement Agreement with the Iowa Board to resolve the pending charges. The Board indefinitely suspended the physician's Iowa medical license, issued him a Citation and Warning and ordered him to pay a \$7,500 civil penalty. Under the terms of the April 17, 2014, Reinstatement Order, the Board reinstated the physician's Iowa medical license and placed him on indefinite probation subject to Board monitoring. The physician is required to have a female healthcare professional chaperone continually present when treating female patients, required to practice medicine in a Board-approved group practice setting, and must continue to receive Board-approved psychiatric treatment and counseling.

**Amended Orders:** After the Board has taken formal disciplinary action against a physician, the Board may issue an Amended Order to modify the terms of the existing disciplinary order.

The Board approved 2 Amended Orders.

1. An Iowa-licensed physician who practices family medicine in Waverly, Iowa, had an Amended Order issued by the Board on April 17, 2014. On March 18, 1992, the Board placed on probation for a period of five years due to substance abuse. The terms of probation were terminated on March 15, 1996. On February 11, 2008, the Board again placed the physician on probation for a period of five years due to substance abuse. The terms of probation were terminated on February 11, 2013. On October 21, 2009, the physician entered into a combined Statement of Charges and Settlement Agreement with the Board. The Board charged the physician with professional incompetency. The Board issued the physician a Citation and Warning and he agreed not to practice obstetrics. The Board placed the physician on probation for a period of five years subject to Board monitoring for professional incompetency. The physician was required to successfully complete a Board-approved remediation program. On April 17, 2014, the Board voted to terminate the restriction on the physician's ability to practice obstetrics.
2. An Iowa-licensed physician who formerly practiced family medicine in Moline, and Rock Island, Illinois, had an Amended Order issued by the Board on April 17, 2014. On February 9, 2012, the Board charged the physician with engaging in sexual misconduct with a female patient in Moline, Illinois, in October 2008. On August 14, 2012, the Board placed the physician on indefinite probation subject to Board monitoring and ordered him to pay a \$10,000 fine. The Board ordered the physician to have a female chaperone present at all times when treating female patients, to complete a Board-approved professional boundaries program and to practice in a Board-approved practice setting only. Under the terms of the April 17, 2014, Amended Order, the physician must have a Board-approved female healthcare provider chaperone present in the room at all

times he is examining or treating a female patients except in the case of an emergency situation, including situations when a female healthcare provider chaperone is not available. In the case of an emergency situation, including situations when a female healthcare provider chaperone is not available, The physician must document the circumstances including the date of the event, name and age of the patient and reason why a female chaperone was not available and submit a written report to the Board with his next quarterly report and submit a written report to his Board-approved Worksite Monitor within 48 hours of the event.

**Confidential Letters of Warning or Education:** When the Board determines that probable cause does not exist to take formal disciplinary action, the Board may send a confidential, non-disciplinary, letter to a licensee expressing concerns and requesting that a licensee take corrective action, including further medical education.

The Board voted to issue 9 confidential Letters of Warning or Education due to the following concerns:

1. Concerns about a physician's neurological evaluation of a patient.
2. Concerns about a physician's medical records management.
3. Concerns about a physician's unprofessional communication with patients.
4. Concerns about a physician's delinquent medical records.
5. Concerns about a physician's failure to recognize and address a patient's dangerous drug interaction.
6. Concerns that a physician prescribed medications to a patient that resulted in a dangerous drug interaction.
7. Concerns that a physician failed to properly address an employee's prescription drug fraud.
8. Concerns that a physician failed to respond to the Board's inquiry.
9. Concerns that a physician was reprimanded by Nebraska for inappropriately accessing the medical records of friends who were not her care and that she inappropriately prescribed medications to family and friends and failed to maintain medical records.

**Board Appearances:** The Board may ask a licensee to appear before the Board to discuss concerns when the Board determines that a face-to-face meeting will assist the Board during the investigative process.

The Board held 4 physician appearances due to the following concerns:

1. Concerns about a physician's treatment of a patient who suffered a stroke.
2. Concerns about the sedation provided to a patient who underwent an angioplasty.
3. Concerns about a physician's failure to provide copies of a patient's medical records upon request.
4. Concerns about a physician performing unnecessary diagnostic testing.

**Monitoring Committee:** The Monitoring Committee monitors licensees who have been disciplined by the Board and require monitoring.

The Board reviewed 8 physicians who are being monitored by the Board. The Monitoring Committee held 3 physician appearances.

**Screening Committee:** The Screening Committee reviews cases that are lower priority and have not been investigated by the Board to determine whether investigation is warranted.

The Screening Committee reviewed 20 cases.

**Licensure Committee:** The Licensure Committee is a committee which reviews initial license applications, renewals and reinstatements and other licensure policies and issues. Most license applications are approved by Board staff without Licensure Committee review. However, some applications raise concerns about an applicant and the Licensure Committee must review the matter to determine whether a license should be granted, renewed or reinstated.

The Licensure Committee reviewed 5 licensure applications and five permanent licenses were granted. The Committee also reviewed the upcoming changes to the registration process for the USMLE Step 3.

**In other action the Board:**

- Elected new officers, effective May 1, and approved the Board's meeting schedule for 2015. Hamed Tewfik, M.D., Iowa City, was elected chairperson, Michael Thompson, D.O., Pella, was elected vice chairperson, and Allison Schoenfelder, M.D., Akron, was elected secretary. The Board's meeting schedule for 2015 will February 5-6, April 2-3, May 14-15, July 9-10, August 27-28, October 15-16, and December 10-11. The Board's scheduled teleconferences for 2015 are January 15, March 5, June 4, September 17, and November 12.
- Affirmed a 2009 Board statement that encourages physicians to effectively assist patients in managing their pain. The board reinforced that a physician should not be at risk of disciplinary action for prescribing, dispensing or administering controlled substances, including opioid analgesics, for a legitimate medical purpose, based on accepted scientific knowledge, sound clinical judgment and adequate documentation.
- Received notices that two physicians were not in compliance with their contracts with the Iowa Physician Health Committee. The Board accepted the Committee's recommendation that one of the physicians be allowed to remain the Iowa Physician Health Program, which monitors physicians with mental health issues, physical disabilities or substance use disorders. The other physician has been removed from the program and is facing Board charges of unprofessional conduct and prescribing, administering or dispensing drugs substances for other than a lawful purpose.
- Received reports from the Iowa Attorney General's Office on eight disciplinary cases and one rulemaking case under judicial review in state courts.

**A press release describing public disciplinary action taken by the Board was distributed and posted on the Board's Website on April 22, 2014. If you have questions about this summary or Board's disciplinary action press release, please contact Kent Nebel, Legal Director, at (515) 281-7088 or [kent.nebel@iowa.gov](mailto:kent.nebel@iowa.gov).**